PTO/SB/22 (10-08)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009		476172000100	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		476172000100	
Application Number 09/896,831		Filed June 28, 2001	
For METHOD AND APPARATUS FOR OFFERING, PRICING, AND SELLING SECURITIES OVER A NETWORK			
Art Unit 3692		Examiner	C. Graham
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	Fee	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	\$130	\$65	\$
Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$
X Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ 555.00
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$
X Applicant claims small entity status. See 37 CFR 1.27.			
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 .			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
attorney or agent of record. Registration Number			
x attorney or agent under 37 CFR 1.34.			
Registration number if acting under	37 CFR 1.34	44,865	_
/Katherine D. Lee/		October 8, 2008	
Signature		Date	
Katherine D. Lee		(415) 268-6983	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
X Total of1 forms are submitted	l		